

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	6	6				
2		1				
3		6				
4		6				
5		5				
6		6				
7		6				
8		6				
9		1				
10		1				
11		1				
12		1				
13	1					
14		1				
15		1				
16		1				
17		1				
18		6				
19		6				
20		6				
21		6				
22		6				
23		1				
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		6				
31		6				
32						
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50						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
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89						
90						
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93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	1							
2	1							
3	1							
4	1							
5	1							
6	1							
7		6						
8		6						
9		6						
10		1						
11		1						
12		5						
13		5						
14		5						
15		5						
16		5						
17		5						
18		5						
19		5						
20		5						
21		5						
22		6						
23		6						
24		6						
25		4						
26		4						
27		4						
28		4						
29		4						
30		4						
31		4						
32		4						
33		1						
34		1						
35		1						
36		1						
37		1						
38		1						
39		1						
40		5						
41		5						
42		5						
43		5						
44		1						
45		1						
46		5						
47		5						
48		5						
49		1						
50		1						
TOTAL IND.		↓		↓		↓		
TOTAL DEP.		←		←		←		
TOTAL CLAIMS								
51		1						
52		5						
53		5						
54		5						
55		5						
56		1						
57		6						
58		6						
59		6						
60		6						
61		6						
62		6						
63		6						
64		6						
65		6						
66		6						
67		5						
68		5						
69		6						
70		6						
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74		6						
75		6						
76		6						
77		6						
78		6						
79		6						
80		6						
81		6						
82		1						
83		1						
84		1						
85		1						
86		1						
87		1						
88		3						
89		3						
90		3						
91		3						
92		3						
93		3						
94		3						
95		5						
96		5						
97		5						
98		1						
99		1						
100		1						
TOTAL IND.		↓		↓		↓		
TOTAL DEP.		←		←		←		
TOTAL CLAIMS								

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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